



Methodist Children's Home
Offering Hope Since 1890

2025 - 2026

BENEFITS ENROLLMENT GUIDE

July 1, 2025 - June 30, 2026



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Welcome to your Benefit Enrollment Period! As a member of Methodist Children's Home, you are eligible for a wide range of valuable benefits designed to:

- Promote the health and wellness of you and your family
- Protect your income while you are working
- Help you balance your personal responsibilities and work life

This Enrollment Guide highlights your choices and provides an overview of the benefits available to you. During this Benefit Enrollment period, you have the opportunity to evaluate the health needs of you and your family, and make any necessary changes.

Please review your options, make final decisions, and be sure to enroll online in your enrollment portal. If you have any questions, please reach out to us. We are happy to help.

Thank you for being a member of our team. We look forward to another great benefit year with you!

Sincerely,

Human Resources

WELCOME



FREQUENTLY ASKED QUESTIONS

Who is eligible for benefits?

All full-time employees regularly scheduled to work at least 30 hours per week are eligible for benefits. Coverage may also be elected for dependents, including your legal spouse and dependent children up to age 26.

What benefits require election?

All benefits are required to be elected or declined electronically via your enrollment system, e3. Every eligible employee must elect or decline coverage, even if you would like things to remain the same, we will ask that you reaffirm your benefit elections.

What if I am enrolling for the first time?

New employees may elect coverages for the first time after meeting the New Hire Waiting Period. Employees are eligible for benefits the 1st of the month following 60 days of full-time employment.

What if I make a mistake in choosing coverage or change my mind?

Once Open Enrollment closes, changes cannot be made unless you experience an IRS recognized event. Please be very careful when selecting your coverage.

What is an IRS recognized event?

Examples include: marriage, divorce, birth or adoption, death, change in spouse's employment status, and change in eligibility. Notify Human Resources and complete appropriate documentation within 30 days of experiencing an IRS recognized event.

What if I need to request an ID card?

Contact information for each insurance carrier can be found on the back cover of this guide. You have the option of calling the carrier to request ID Cards, or you can also print a temporary card directly from the carrier's website.

When do my requested Open Enrollment elections go into effect?

Approved Open Enrollment elections go into effect July 1, 2025. The complete plan year is July 1, 2025 through June 30, 2026.

Key Insurance Terms

Deductible

Deductible is the amount of money you pay for eligible medical expenses in a calendar year. For In-Network providers, you will pay the negotiated rate. Out-of-Network, you will pay the full charge. After the Deductible is met, you are only responsible for the Coinsurance or Copay amounts until you reach the Maximum Out-of-Pocket amount.

Coinurance

Coinurance is a cost sharing between you and the insurance company, once your deductible has been met.

Copay

Copay is a flat fee you pay at the time of service.

Maximum Out-of-Pocket

The most you will pay for covered expenses during the year. After meeting this amount, the plan will pay 100% of covered expenses for the rest of the year.

In/Out-of-Network

If providers are contracted within the plan (In-Network) then they are required to provide care at a negotiated fee which results in lower Out-of-Pocket costs. Providers that are not contracted within your plan's network (Out-of-Network) do not have to adhere to the negotiated contracted rates, therefore can charge you more. It is a smart financial decision to stay In-Network whenever possible.

MEDICAL OVERVIEW

Methodist Children's Home is pleased to offer you two medical plan options this year through Blue Cross Blue Shield. Both plans offer In and Out-of-Network benefits. Contact Blue Cross Blue Shield directly to locate In-Network providers and facilities. Please see the table below which provides coverage highlights for both plans. For a complete benefits summary, please refer to the Blue Cross Blue Shield plan documents.

Coverage	BLUE CROSS BLUE SHIELD	
	BCBS HSA PPO Plan	BCBS Traditional PPO Plan
	In-Network	In-Network
Deductible Individual / Family	Calendar Year \$5,000 / \$10,000	Calendar Year \$3,000 / \$5,000
Coinurance	100% / 0%	80% / 20%
Primary Physician Service	Deductible	\$30 Copay
Specialist Physician Service	Deductible	\$60 Copay
Preventive Care	100% Covered	100% Covered
Inpatient Hospitalization	Deductible	Deductible, then 20%
Outpatient Surgery	Deductible	Deductible, then 20%
Emergency Room*	Deductible	\$500 Copay + 20% Coinsurance
Urgent Care Services	Deductible	\$40 Copay
Diagnostic Lab & X-Ray	Deductible	\$0 Copay & \$0 Copay
Advanced Imaging	Deductible	Deductible, then 20%
Prescription Medications		
Generic	Deductible	\$10
Brand Preferred		\$25
Brand Non-Preferred		\$50
Mail-Order (90 Day Supply)	Deductible	2.5X Retail Copay
Out-of-Pocket Max Individual / Family	Calendar Year \$5,000 / \$10,000	Calendar Year \$5,000 / \$10,000
Out-of-Network Benefits		
Deductible Individual / Family	Calendar Year \$10,000 / \$20,000	Calendar Year \$5,000 / \$10,000
Coinurance	50% / 50%	50% / 50%
Out-of-Pocket Max Individual / Family	Calendar Year \$10,000 / \$20,000	Calendar Year \$10,000 / \$20,000

*Extra costs could arise for services after admittance to the Emergency Room.

MEDICAL DEDUCTIONS

Employee Gross Wages UNDER \$2,000

Bi-Weekly Deductions (24x Per Year)	BCBS HSA PPO Plan		BCBS Traditional PPO Plan	
	UNDER 5 Years of Service	OVER 5 Years of Service	UNDER 5 Years of Service	OVER 5 Years of Service
Employee	\$20	\$10	\$48	\$28
Employee + Spouse	\$182	\$151	\$332	\$277
Employee + Child(ren)	\$140	\$117	\$255	\$212
Employee + Family	\$237	\$197	\$433	\$361

Employee Gross Wages OVER \$2,000

Bi-Weekly Deductions (24x Per Year)	BCBS HSA PPO Plan		BCBS Traditional PPO Plan	
	UNDER 5 Years of Service	OVER 5 Years of Service	UNDER 5 Years of Service	OVER 5 Years of Service
Employee	\$56	\$36	\$116	\$92
Employee + Spouse	\$242	\$212	\$443	\$387
Employee + Child(ren)	\$187	\$163	\$340	\$297
Employee + Family	\$316	\$276	\$577	\$505

Employee Gross Wages OVER \$3,850

Bi-Weekly Deductions (24x Per Year)	BCBS HSA PPO Plan		BCBS Traditional PPO Plan	
	UNDER 5 Years of Service	OVER 5 Years of Service	UNDER 5 Years of Service	OVER 5 Years of Service
Employee	\$80	\$60	\$162	\$139
Employee + Spouse	\$303	\$272	\$553	\$498
Employee + Child(ren)	\$233	\$210	\$425	\$382
Employee + Family	\$395	\$355	\$721	\$649

HEALTH SAVINGS ACCOUNT (HSA)

Only eligible if you elect the BCBS HSA PPO Plan

What is a Health Savings Account (HSA)?

A Health Savings Account (HSA) is an account you can use to pay for qualified health expenses for yourself and your dependents (including dependents NOT covered by this medical plan). Unlike traditional tax advantaged accounts for health expenses, your HSA is portable if you leave your employer. You can only contribute while you are covered by a high-deductible health plan.

Why would I contribute to an HSA?

Contributions you make to your HSA are tax-free. This reduces your taxable income and potentially, your tax liability. Consult your tax advisor to determine how your HSA affects your unique tax circumstances. When you withdraw funds to pay for qualified health expenses, the funds remain tax-free.

Whose money is it?

Based on IRS rules, the money you and/or your employer deposit into your account is yours. You (or a user authorized by you) are the only one who can withdraw the money from this account. The funds are yours even if your employment ends.

How much money can I put into the account?

You can contribute to your HSA each year you are eligible.

2025 IRS HSA Contribution Limits:

Individual: \$4,300

Family: \$8,550

Over the age of 55: \$1,000 catch-up contribution

2026 IRS HSA Contribution Limits:

Individual: \$4,400

Family: \$8,750

Over the age of 55: \$1,000 catch-up contribution

When can I start to use the funds in my HSA?

Once your account is open, a deposit has been made to your account, and funds are available, you can start using your HSA. You are 100 percent vested as soon as the funds are deposited and you have total control over the funds.

What happens to my HSA if I leave my employer?

All funds contributed to your HSA are yours to keep. You can:

- Keep your HSA or;
- Transfer your funds to another qualifying HSA within 60 days of withdrawing the funds to avoid taxes and an additional 10 percent penalty.

HSA Fun Fact

Online retailer Amazon announced you can use your HSA to purchase eligible medical products from their website.

Methodist Children's Home will contribute a one-time lump sum of \$1,000 and will be submitted shortly after the first payroll run following the employee's elections. For those electing on 7/1, the funds will be available in their Health Savings Account within the first week of July.

FLEXIBLE SPENDING ACCOUNT (FSA)

Flexible Spending Accounts (FSAs) are reimbursement accounts that allow you to pay for certain eligible expenses with tax-free dollars. Through pre-tax salary reduction and reimbursement, you convert taxable income into non-taxable benefits. The result is reduced tax withholding and more tax-home pay. FSA participation results in tax savings of approximately 30% for all dollars run through the plan. When enrolled in the FSA, you will receive a debit card in the mail to use for eligible medical expenses.

There are two types of FSAs:

Healthcare FSA (Only Eligible if you elect the BCBS Traditional PPO Plan)

Healthcare FSA can be used to pay for eligible unreimbursed medical expenses (not covered or paid by any insurance) incurred by you, your spouse, and your dependents. Examples include: medical, dental, vision, copayments, coinsurance, deductibles and prescription drugs.

Example of Eligible Medical Expenses for the Healthcare FSA:

- Certain over-the-counter medications (prescription from medical provider required)
- Copays (including Rx), deductibles, and Out-of-Pocket costs
- Certain medical transportation
- Eye examinations, contact lenses (including cleaning and maintenance supplies) and eyeglasses
- Qualified dental expenses
- Acupuncture as a treatment
- Chiropractic care as a treatment
- Mental health and substance abuse care
- Nursing home expenses

Dependent Care FSA (Only Eligible if you have children under age 13)

Dependent Care FSA can be used to pay for eligible dependent care expenses (daycare, childcare) so you and your spouse can work, look for work or attend school full-time. Covered expenses must be for:

- Dependent children age 13 or under; or
- A person of any age whom you claim as a dependent on your taxes and who is mentally or physically incapable of caring for himself or herself.

Eligible expenses include childcare (nursery, preschool or private sitter), before and after school care, and day camps.

Ineligible expenses include kindergarten tuition, overnight camps, and expenses paid to a tax dependent.

Important Notes About FSAs:

- There are varying FSA plan designs that treat unused funds at the end of the plan year differently. For more information about how your plan treats unused funds, please refer to your plan documents.
- Your FSA annual election cannot change during the plan year except in the event of an IRS recognized event.
- Per IRS regulations, Healthcare FSA elections cannot exceed **\$3,300** per family per tax year. Any unused balance up to **\$660** that remains in your account as of the last day of the plan year will roll into the new plan year for you
- to be able to use towards eligible expenses you incur during the new plan year.
- Per IRS regulations, dependent care elections cannot exceed **\$5,000** per family per tax year.
- The Healthcare FSA and the Dependent Care FSA are “use it or lose it” type of accounts. Unused funds at the end will be lost.

FIND CARE



BlueCross BlueShield
of Texas



Need a New Doctor? Find Care on Blue Access for MembersSM

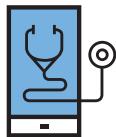
Find a provider and manage medical expenses all in one place.

Visit BAMSM at bcbstx.com to log in or create an account. Then, choose **Find Care** to:

- Find in-network providers, clinics, hospitals and pharmacies.
- Search by specialty, ZIP code, language spoken, gender and more.
- View clinical certifications and recognitions. Compare quality awards for doctors, hospitals and more.
- Read or share reviews for providers.
- Estimate the out-of-pocket costs for more than 1,700 health care procedures, treatments and tests.*

Find a Doctor Wherever You Are

- Log in to BAM.** Use your ZIP code to find providers in your network.
- Search as a guest.** Go to bcbstx.com, choose Find Care and use the ZIP code at your location to find in-network providers near you.
- Need more help?** Call 800-810-BLUE (2583). Also applies to Global[®] Core.



Go Mobile with Blue Cross and Blue Shield of Texas

Even on-the-go, you can manage your ID card and stay on top of claims activity, coverage information and prescription refill reminders. It's easy: Log in or create a BAM account at bcbstx.com or text **BCBSTXAPP** to **33633**^{**} to download our mobile app.

* Not all plans provide this information.

** Message and data rates may apply. Terms and conditions and privacy policy are available at bcbstx.com/mobile/text-messaging.

Experience a New Kind of Wellness — Log In to the Well onTarget® Portal

Well onTarget is designed to give you the support you need to make healthy lifestyle choices — and reward you for your hard work.

Member Wellness Portal

The Well onTarget Wellness Portal uses the latest technology to give you the tools you need for better health. Your wellness journey begins with a suggested list of activities based on the information you provided in the Health Assessment.*

Now you have a step-by-step plan to guide you on the way to living your best life.

The suite of programs and tools include:

- **Digital Self-management Programs:** Learn about nutrition, fitness, weight loss, quitting smoking, managing stress and more!
- **Health and Wellness Library:** The health library has useful articles, podcasts and videos on health topics that are important to you.
- **Blue PointsSM Program:**** Earn points for wellness activities to redeem for a gift for yourself or someone else.
- **Tools and Trackers:** These interactive resources help keep you on track while making wellness fun.
- **Health Assessment:** Answer some questions to learn more about your health and receive a personal wellness report.
- **Fitness and Nutrition Tracking:** Get Blue Points for tracking activity with popular devices and mobile apps.
- **Personal Challenges:** Join a personal challenge to help you reach your goals. There are over 30 challenges, so you can choose the best one to fit your wellness journey. Topics include stress, sleep, physical activity and more!

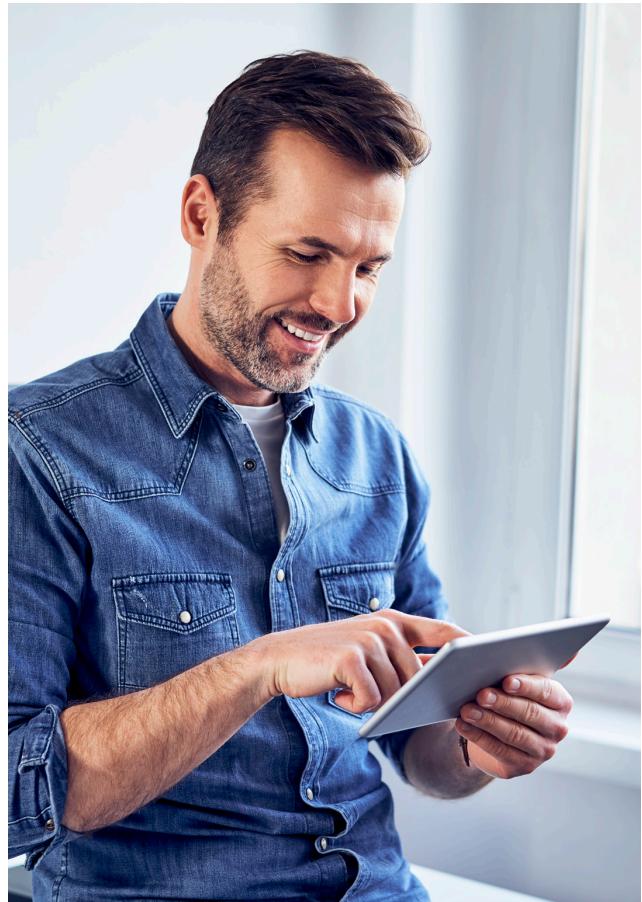
How to Access the Portal

Use your Blue Access for MembersSM (BAMSM) account:

- Log in to BAM at bcbstx.com/member. If this is your first time logging in, you will need to register your account. Click [Create an Account](#) on the login screen.
- Once you are in BAM, click on the [My Health](#) tab, then [Wellness](#). Click on [Visit Well onTarget](#) and you will be taken to the Well onTarget portal.

Questions?

If you have any questions about Well onTarget, call Customer Service at [877-806-9380](tel:877-806-9380).



**Log in to the Well onTarget
Member Wellness Portal today!**

MENTAL WELLBEING



If you struggle with thoughts or feelings that make it hard to get through the day, you're not alone. About half of all people in the U.S. will experience a mental health concern at some point in their lives.¹

Blue Cross and Blue Shield of Texas is here to help. Your health plan includes mental health support like counseling, specialized care and online programs. It's okay to need help. You and your covered family members can get support for conditions such as depression, anxiety, substance use disorder, eating disorders and pediatric mental illness.

Our new Mental Health Hub can guide you to the right care for your unique needs.

It features access to mental health providers, plus a variety of assessments, videos, podcasts, articles, tools and more. When you first visit the Hub, take the **Wellness Check-In Assessment**. Based on your results, you will receive a list of recommended resources. You can retake it whenever you'd like to track your progress, and you can use it for covered dependents, including children, too.

Additional Resources for Your Mental Wellbeing

Digital Mental Health²

BCBSTX offers self-led, online programs with optional coaching support through Learn to Live. They can help you build mental resilience or manage stress, depression, panic and other mental health concerns. The programs are confidential and available 24/7 at no extra cost. Log in at bcbstx.com, then go to **Behavioral Health** and choose **Digital Mental Health** to get started.

Counseling and Psychiatric Therapy³

Explore our expansive network of therapists, psychologists, substance use counselors and psychiatrists. In-person, telephone and video services are available. Log in at bcbstx.com and then go to **Behavioral Health** to start your search.

Employee Assistance Program²

Delivered through ComPsych GuidanceResources, the EAP provides a set amount of free counseling sessions, legal and financial help, referral services and online tools to you and members of your household. Check with your employer to learn whether this benefit is part of your health plan. If it is, visit guidanceresources.com and use the **Web ID TXEAP** to register.

Virtual Care^{2,3}

Your health plan may include virtual counseling. With this offering, you can meet with a board-certified therapist or psychiatrist by phone or video from the comfort of your home. Visit MDLIVE.com/bcbstx or teladoc.com/bcbstx to schedule an appointment.



BCBSTX is here to support you. To get started, verify program eligibility or learn more, log in to **Blue Access for MembersSM** at bcbstx.com and select **Behavioral Health**. You can also call the number on the back of your member ID card for assistance.

Explore the Mental Health Hub Today! 

1. Log in to at bcbstx.com
2. Select **Behavioral Health**
3. Choose **Mental Health Hub**

The Hub is confidential and available 24/7 at no added cost to you².

KNOW WHERE TO GO

What do you do if your clutch player breaks an arm in the big game? Or you slice your finger chopping veggies? Or have stomach cramps after last night's sushi date? Often the choice is clear. If you have signs of a heart attack, it's best to go to the emergency room. But what if you have a sore throat? Or lower back pain?

Knowing where to go can make a big difference in the cost of your care — especially when you use in-network providers.

Doctor

Is your blood pressure high? Are allergies making you miserable? Can't sleep? Your go-to provider is a good place to start. Some even offer telemedicine. If you need a specialist, your doctor will tell you.

We make it easy to find independently contracted, in-network providers near you:

- Go to bcbstx.com and click **Find Care**
- For personalized search results, log in or register at bcbstx.com and search in Blue Access for MembersSM
- Call Customer Service at the number on your ID card



Retail Health Clinic

Need a flu shot? Feel queasy? Have an ear ache or rash? Many grocery stores and pharmacies have on-site medical clinics. Some may even see patients evenings, weekends and holidays.

Good for: health exams, shots, cough, sore throat

Wait time: check with office

Cost: in network \$ out of network \$\$



Urgent Care Center

Sprain your ankle? Have a monster migraine? Can't stop coughing? These centers offer non-emergency care when your doctor's office isn't open evenings, weekends or holidays. Some may offer online booking.

Good for: headache, stomach ache, sinus pain

Wait time: check with clinic

Cost: in network \$ out of network \$\$



Hospital ER

Worried you may be having a heart attack? Did you black out after a nasty fall? Are you coughing up blood? ER doctors and staff are trained to treat serious and life-threatening health issues 24/7.

Good for: chest pain, bleeding, broken bones

Wait time: varies

Cost: \$\$\$



Know the Difference: Freestanding ER vs. Urgent Care Center

Freestanding ERs look a lot like urgent care centers, but are not affiliated with a hospital. Nearly all are out of network. You could end up with a hefty bill (or several bills). You might even be sent to a hospital ER for care! Here are ways to spot a freestanding ER:

1. Look for "Emergency" on the building exterior.
2. Check the hours. If it's open 24/7, it's a freestanding ER. Urgent care centers close at night.
3. Confirm it's not connected to a hospital.
4. Ask if it follows the copay, coinsurance and deductible payment model.

If you need emergency care, call 911 or seek help from any doctor or hospital immediately.

PREScription SAVINGS

Want to save money on your prescriptions?

Even if you have insurance, you could still pay less Out-of-Pocket than your copay or coinsurance through the medical plan. The following information provides helpful hints and optional discounts you can use to save money on your prescriptions.

Everyone should have safe, affordable medications with transparent prices.



Mark Cuban's Cost Plus Drugs

Cost Plus Drugs is an online pharmacy created by Mark Cuban to deliver cost effective medications to the public without all the mark-ups. If you don't have insurance or have a high deductible plan, you know that even the most basic medications can cost a fortune. Many people are spending crazy amounts of money each month just to stay healthy. Cost Plus currently provides an extensive list of medications available including Preventive, Diabetes, Heart Health, Gastrointestinal, Cancer and Mental Health. The program is continuously updating the list. ([Homepage of Mark Cuban Cost Plus Drugs](#))

Go to the following website: www.costplusdrugs.com/medications to check if your medication(s) can be filled using the Cost Plus Program. If your medication is on the list, create an account and then call your physician to discuss.



Amazon

Did you know that Amazon also offers many generic prescriptions at a substantially discounted price? You must have an Amazon Prime membership to utilize the pharmacy. Once logged in, search for pharmacy in the search box to get started. Many medications for conditions such as; High Blood Pressure, High Cholesterol, Depression, Diabetes, Anxiety and more are available through the Amazon Pharmacy.



GoodRx

Download the app or go online to check prices of various medications at a range of pharmacies in your area. GoodRx is available regardless of your enrollment in the medical plan. Don't forget, GoodRx can be used for your pets medications, too! There are many coupons that are available through the program that you can use at your pharmacy.



Manufacturer's Assistance

Manufacturers provide financial assistance whether you are enrolled in a medical plan or not; check the manufacturer's website to see if they offer a copay assistance program or coupons for your brand name medications. Many programs will require you to enroll prior to picking up your prescription, check the site for full details.



Talk to your Pharmacist

Most pharmacies have a database of discount programs available. Ask your pharmacist if your medications can be filled using one of the programs.

Disclaimer: These benefits do not work in conjunction with your major medical plan, therefore any money spent on prescriptions while utilizing these programs will not go towards your deductible or Out-of-Pocket Maximum.

DENTAL BENEFITS

Methodist Children's Home is pleased to offer you a dental plan option this year through Lincoln. The PPO Plan offers In and Out-of-Network benefits. Contact Lincoln directly to locate In-Network providers and facilities. Please see the table below which provides coverage highlights for the plan. For a complete benefits summary, please refer to the Lincoln plan documents.

LINCOLN		
Coverage	PPO Plan	
	In-Network	Out-of-Network*
Deductible Individual / Family	Calendar Year \$50 / \$150	Calendar Year \$50 / \$150
Maximum Annual Benefit (Calendar Year)	\$2,000	\$2,000
Preventive Care	100%	100%
Basic Services	80%	80%
Major Services	50%	50%
Orthodontia Coverage (Children only to age 19)	50% up to \$2,000 Lifetime Maximum	50% up to \$2,000 Lifetime Maximum

*Plans with Out-of-Network benefits may require greater cost share (Deductible/Coinsurance) and charges may exceed the carrier's "reasonable and customary" rate or "maximum allowable charge", this may result in leaving the member paying the balance. Some plans do not cover claims from Out-of-Network providers. Please refer to the summary of benefits or contact the carrier to better understand Out-of-Network coverage.

Dental Payroll Deductions

Bi-Weekly Deductions (24x Per Year)	PPO Plan
Employee	\$0.00
Employee + Spouse	\$13.84
Employee + Child(ren)	\$11.53
Employee + Family	\$27.68



Group Benefits



The Lincoln Dental Mobile App

Everything you need to care for your smile – at your fingertips

Keeping track of your dental benefits is now easier than ever with the **Lincoln Dental Mobile App**. With this seamless, user-friendly tool, you can:

- Find a network dentist near you
- View plan details
- Track your claims
- Access your ID card on your phone quickly
- See what your plan covers and what you owe for your dentist visits

Download the Lincoln Dental Mobile App today!

Use your LincolnFinancial.com credentials to log in to the app. If you don't have a web account, registration is easy within the app itself. Just follow the onscreen prompts!



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Lincoln Financial is the marketing name for Lincoln National Corporation and its affiliates.

Affiliates are separately responsible for their own financial and contractual obligations.

LCN-6489689-031924

MAP 10/24 **Z04**

Order code: DTL-MOAPP-FLI001

Questions?

Call Lincoln customer service at **800-423-2765**, Monday through Thursday, between 8:00 a.m. and 8:00 p.m. Eastern, or Friday, between 8:00 a.m. and 6:00 p.m. Eastern, or or email Claims@LFG.com.

Insurance products are issued by The Lincoln National Life Insurance Company, Fort Wayne, IN, which does not solicit business in New York, nor is it licensed to do so. In New York, insurance products are issued by Lincoln Life & Annuity Company of New York, Syracuse, NY. Both are Lincoln Financial companies. Product availability and/or features may vary by state. Limitations and exclusions apply.

VISION BENEFITS

Methodist Children's Home is pleased to offer you a vision plan option this year through Lincoln. Visit an In-Network provider to access benefits for annual eye exams, prescription contacts, or lenses and frames. If you visit an Out-of-Network provider, you may be required to submit a claim form to Lincoln to access your benefits. For a complete benefits summary, please refer to the Lincoln plan documents.

LINCOLN			
Coverage	Vision Plan		
	In-Network	Out-of-Network	Frequency of Benefits
Eye Examination	\$10 Copay	Reimbursed up to \$40	Once every 12 months
Eyeglass Lenses: Single Bifocal Trifocal	\$25 Copay	Reimbursed up to: Single \$40 Bifocal \$60 Trifocal \$80	Once every 12 months
Eyeglass Frames	\$130 Retail Allowance + 30% off balance	Reimbursed up to \$45	Once every 24 months
Contact Lenses (In lieu of eyeglasses)	\$125 Retail Allowance	Reimbursed up to \$125	Once every 12 months
Laser Vision Correction	Discount Pricing Available	N / A	N / A

Vision Payroll Deductions

Bi-Weekly Deductions (24x Per Year)	Vision Plan
Employee	\$0.00
Employee + Spouse	\$2.60
Employee + Child(ren)	\$3.56
Employee + Family	\$6.19



Online vision tools

Convenient web-based services and resources



As a *VisionConnect*® member, you can access vision plan information and a variety of tools to help you:

- Find a provider
- Learn how to use your vision benefits
- Understand which eyewear is best for you
- Discover contact lens and Lasik discounts
- Register for an online member account to:
 - Review your benefits, both in- and out-of-network
 - Print an ID card
 - And more

Register now

Visit LVC.LFG.com and select **Register Now**.

On the registration page:

1. Enter your **subscriber ID** (if known) or the **last four digits of your Social Security number**.
2. Add your **personal and contact information**. Enter the exact name used to enroll, including applicable full first names, maiden names, hyphens, and suffixes.
3. Choose your **unique username, password, and four-digit PIN**. Select **Create** to finalize your account setup.

If you have problems registering, contact Customer Service at **800-440-8453**.

Find a vision provider

Search for your own doctor or other nearby providers who offer the services you need, including handicap accessibility, additional spoken languages, or weekend office hours. Locate a provider in a few easy steps:

1. Visit LVC.LFG.com.
2. In the Provider Quick Search box, enter a **ZIP code or street address**.
3. Select the **Search** button to display a list of providers close to you.

Lincoln Vision® benefits

How to use your vision benefits

- 1 Find a participating provider by selecting **Provider Quick Search** on LVC.LFG.com or by calling **800-440-8453**.
- 2 Log in to your online member account to review your benefits or to print a vision ID card before you visit a provider.
- 3 When you visit a provider, you may be asked for your birthdate and subscriber ID (if known).



Note to providers: For more information about this vision plan, or to receive authorization for service, please visit us online at spectera.com or call **800-638-3120**.

This card is not required for service and does not guarantee benefit eligibility.

Print an ID card

While a plan ID card isn't required to receive vision care, you can print a card online or save it to a computer or digital device.

1. Log in to LVC.LFG.com using your username and password.
2. Select **Print ID Card** on the *Lincoln Vision* portal screen.
3. Select the **member you want an ID card for** from the drop-down menu, click **Get ID Card**, then print or save.



LIFE & DISABILITY INSURANCE

Basic Group Term Life and Accidental Death and Dismemberment (AD&D) Insurance

Methodist Children's Home provides all benefit-eligible employees with a Term Life and AD&D insurance policy through Lincoln in the amount of 2x your annual salary up to \$250,000. This is provided at no cost to you. Dependents can also receive up to \$100,000 for spouse and \$10,000 for each child (which is not employer paid) the cost is \$15.54 (spouse and child(ren) as a package deal.

It is your responsibility to keep an updated beneficiary form on file.

Disability Insurance

Disability insurance provides income protection, should you become disabled due to a non-work-related illness or injury. These very important coverages are provided to all full-time, benefit eligible employees of Methodist Children's Home at no additional cost. Refer to the Lincoln plan documents for complete plan information.

LINCOLN		
Coverage	Short-Term Disability (Employer Paid)	Long-Term Disability (Employer Paid)
Benefit Pays	60% of Base Salary	60% of Base Salary
Maximum Benefit	\$1,500 per Week	\$6,000 per Month
Benefits Begin	Day 15	Day 91
Maximum Benefit Period	13 Weeks	Social Security Normal Retirement Age (SSNRA)
Pre-Existing Condition	None	6 month look back / 12 months insured

SUPPLEMENTAL BENEFITS

Accident Plan

Lincoln's Accident Insurance is an indemnity plan that provides you and your family with hospital, doctor, emergency room, accidental death and catastrophic accident benefits in the event of a covered accident. These benefits can help with the unexpected Out-of-Pocket medical and non-medical expenses associated with an accident on or off the job. This plan provides a **\$50 wellness benefit** per year for completing certain routine wellness screenings or procedures. Below are some of the lump-sums that are paid out for various accidents. Please see Lincoln plan documents for additional benefit information.

Type of Plan	Accident Plan
Accidental Death: Employee	\$25,000
Spouse	\$12,500
Child(ren)	\$6,250
Ambulance	Air: \$1,500; Ground: \$400
Emergency Room	\$200
Hospital Admission	\$750
Hospital Confinement	\$150
Hospital ICU Admission	\$1,500
Hospital ICU Confinement	\$300
Major Diagnostic Exam	\$250
X-Ray	\$175
Initial Visit Care	\$125
Companion Lodging (100 miles or more)	\$150 per day
Transportation (100 miles or more)	\$300 per trip
Bi-Weekly Rates (24x Per Year)	
Employee	\$5.96
Employee + Spouse	\$9.96
Employee + Child(ren)	\$11.02
Employee + Family	\$14.93

SUPPLEMENTAL BENEFITS

Hospital Indemnity Plan

Lincoln's Hospital Indemnity plan provides you and your family with cash payments in the event of a hospital admission. This plan is particularly effective at covering deductible and coinsurance costs, which can escalate quickly due to a hospital stay. Lincoln's payments do not coordinate with any medical insurance, facility or doctor, thereby giving you the peace of mind of having complete control over your financial resources. Please see Lincoln plan documents for additional benefit information. This plan provides a **\$50 wellness benefit** per year for completing certain routine wellness screenings or procedures.

Benefits	Hospital Indemnity Plan
Hospital Admission	\$1,000 per day for 4 days per calendar year
Hospital ICU Admission	\$2,000 per day for 1 day per calendar year
Hospital Confinement	\$150 per day, up to 30 days, starting day 2 of confinement
Hospital ICU Confinement	\$300 per day, up to 30 days, starting day 2 of confinement
Bi-Weekly Rates (24x Per Year)	
Employee	\$14.23
Employee + Spouse	\$30.39
Employee + Child(ren)	\$21.61
Employee + Family	\$39.34

Critical Illness Plan

Lincoln's Critical Illness Insurance pays a lump-sum benefit if you are diagnosed with a covered specified critical illness such as a heart attack, stroke or specified disease. Even those who plan for unexpected events with life, disability and health insurance may discover that some expenses associated with a critical illness can still remain unpaid. Without adequate protection, you may have to access retirement savings or rely on other financial sources in your time of need. This policy helps preserve your lifestyle in the event of a specified critical illness. It provides benefits to you directly and allows you to use the funds however you choose. Please refer to Lincoln's plan documents for full plan details, limitations and exclusions. This plan provides a **\$50 wellness benefit** per year for completing certain routine wellness screenings or procedures.

Insurance Coverage Options	Benefit Amount
Employee	\$10,000
Spouse	100% of the Employee's Benefit up to \$10,000
Child(ren)	Automatically receive 50% of the Employee's Benefit
Covered Conditions	Coverage Percentage
Invasive Cancer	100% of Benefit Amount
End-Stage Renal (Kidney) Failure	100% of Benefit Amount
Major Organ Failure	100% of Benefit Amount
Heart Attack	100% of Benefit Amount
Stroke	100% of Benefit Amount
Cerebral Palsy	100% of Benefit Amount

Rates are based on your age and the amount of coverage selected. Please see Lincoln's plan documents for additional benefit information and rates.

EMPLOYEE ASSISTANCE PROGRAM



Employee Assistance Program

The resources
you need to meet
life's challenges



*EmployeeConnect*SM offers professional, confidential services to help you and your loved ones improve your quality of life.

 In-person guidance	 Unlimited 24/7 assistance	 Online resources
<p>Some matters are best resolved by meeting with a professional in person. With <i>EmployeeConnect</i>, you and your family get:</p> <ul style="list-style-type: none">▪ In-person help for short-term issues (up to five sessions¹ with a counselor per person, per issue, per year)▪ In-person consultations with network lawyers, including one free 30-minute in-person consultation per legal issue, and 25% off subsequent meetings	<p>You and your family can access the following services anytime online, via the mobile app, or with a toll-free call:</p> <ul style="list-style-type: none">▪ Information and referrals on family matters, such as child and elder care, pet care, vacation planning, moving, car buying, college planning, and more▪ Legal information and referrals for family law, estate planning, and consumer and civil law²▪ Financial guidance on household budgeting and short- and long-term planning	<p><i>EmployeeConnect</i> offers a range of information and resources you can research and access on your own. Expert advice and support tools are just a click away when you visit GuidanceResources.com or download the GuidanceNowSM mobile app. You'll find:</p> <ul style="list-style-type: none">▪ Articles and tutorials▪ Videos▪ Interactive tools, including financial calculators, budgeting worksheets, and more

¹In California, up to three sessions in six months, starting with initial contact by the employee.

²Services aren't included for employment law issues.

*EmployeeConnect*SM

EMPLOYEE ASSISTANCE PROGRAM SERVICES

Confidential help available 24 hours a day, seven days a week for employees and their family members. Get help with:

▪ Family	▪ Emotional	▪ Relationships
▪ Parenting	▪ Legal	▪ Stress
▪ Addictions	▪ Financial	



Your MCH 401(k) Retirement Plan

Here's how your plan works:



Methodist Children's Home
Offering Hope Since 1890

YOUR CONTRIBUTIONS

You can choose how much of your paycheck to contribute into your plan - the more you save, the more you'll have in retirement. For 2025, the maximum amount you can save from your paycheck into the 401(k) plan is \$23,500, plus an additional \$7,500 if you are age 50 or older. New for 2025: If you are age 60, 61, 62 or 63, you can defer up to an additional \$11,250 as a catch-up instead of the \$7,500.

MCH CONTRIBUTIONS

MCH will also contribute to your plan to help you save for retirement. This is done in two components:

- A basic matching contribution: Your employer will match 100% of the first 6% you contribute.
- A non-elective (Safe Harbor) contribution: Each year, your employer will contribute an amount equal to 3% of your salary, regardless of whether you contribute from your own paycheck or not.

PLAN ELIGIBILITY

Employees are eligible to participate in the MCH 401(k) plan the 1st of the month following 60 days of employment after their hire date. After completion of one full year and 1,000 hours of service with MCH, employees are eligible for the 3% non-elective employer contribution and the match up to 6%.

VESTING SCHEDULE

The 3% non-elective employer contribution and the employee's contribution are automatically 100% vested. The matching amount is on a 6-year graded vesting schedule as follows:
2 years of service = 20%, 3 years of service = 40%, 4 years of service = 60%, 5 years of service = 80%,
6 years and beyond = 100% vested. If you separate service prior to reaching 100%, the non-vested portion will become forfeited. Your own contributions are always 100% vested.

RESOURCES

To learn more about your MCH 401(k) plan: MCH401k.com

To access your 401(k) account online: LincolnFinancial.com/Retirement

Need to call Lincoln for help? **800-234-3500 (M-F 7a-7p Central)**

Need Advice on Your 401(k)?

Winnow Wealth is the financial advisor for the MCH 401(k) plan - ready to help you!



WINNOW·WEALTH

WE ARE HERE TO HELP YOU!

We are happy to assist you with your MCH 401(k) plan. If you need help designating a beneficiary, selecting the right investment choices for your unique situation, or ensuring you maximize your employer matching contributions, please don't hesitate to meet with us. We are here to support you in making the most of your retirement plan. Be sure to visit MCH401k.com for details about your plan.

YOUR PLAN ADVISORS



Chad Castle, RICP®



WINNOW·WEALTH



Jessica Burch, MBA, CFP®

ABOUT WINNOW WEALTH

Winnow Wealth is an independent financial planning firm based in Waco, Texas. We specialize in helping individuals make confident financial decisions—before and during retirement. As the advisor for the MCH 401(k) plan, we're here to offer personalized guidance, answer your questions, and help you make the most of your retirement benefits.

HOW TO CONTACT US

(254) 776-8400
hello@WinnowWealth.com

200 W State Hwy 6, Suite 330
Waco, TX 76712



SCAN HERE
TO BOOK A
MEETING
WITH US

CONTACT INFORMATION

QUESTIONS REGARDING	CARRIER	PHONE / WEBSITE
Medical Benefits	BCBS of Texas	888-697-0683 www.bcbstx.com
Health Savings Account (HSA)	HSABank	800-357-6246 www.hsabank.com
Flexible Spending Account (FSA)	PBH Benefits	888 - 629-2363, Option 3 www.pbhbenefits.com
Dental Benefits	Lincoln	800-423-2765 www.lincolnfinancial.com
Vision Benefits	Lincoln	800-423-2765 www.lincolnfinancial.com
Life Insurance	Lincoln	800-423-2765 www.lincolnfinancial.com
Disability Insurance	Lincoln	800-423-2765 www.lincolnfinancial.com
Supplemental Benefits	Lincoln	800-423-2765 www.lincolnfinancial.com
Employee Assistance Program	Lincoln	888-628-4824 www.guidanceresources.com
401(k) Retirement Plan	Lincoln	800-234-3500 www.lincolnfinancial.com/Retirement
Advice Regarding 401(k) Retirement Plan	Winnow Wealth	254-776-8400 www.WinnowWealth.com
COBRA Coverage	HealthEquity WageWorks	844-768-5646, PO Box 223684, Dallas, TX 75222-3684

2025 - 2026

In this booklet we describe the highlights of our benefit package in non-technical language. In every respect, your rights to benefits under each plan are solely governed by the official document, not the information in this overview packet. If there is a discrepancy, the official Plan documents will prevail as accurate. Please refer to the plan-specific documents published by each of the respective carriers for detailed plan information. Please be aware that any and all elements of our benefit package may be modified in the future to meet Internal Revenue Service rules or otherwise as decided by Methodist Children's Home. This booklet may not be reproduced or redistributed in any form or by any means without express, prior permission in writing, from Methodist Children's Home.



MarshMcLennan
Agency

